



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Bart's Bridge PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		46217.40
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	34215.87									
(c) Total Receipts (from Line 19) .....	5050.00	20050.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	39265.87	66267.40								
7. Total Disbursements (from Line 31) .....	15617.15	42618.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	23648.72	23648.72								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Bart's Bridge PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	3500.00	6000.00
(ii) Unitemized .....	550.00	550.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4050.00	6550.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	1000.00	13500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	5050.00	20050.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5050.00	20050.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5050.00	20050.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1117.15	3618.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1117.15	3618.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	34000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	15617.15	42618.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15617.15	42618.68

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5050.00	20050.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5050.00	20050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1117.15	3618.68
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1117.15	3618.68

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

A.

Full Name (Last, First, Middle Initial)

Robert G. Benser

Mailing Address P.O. Box 481

City State Zip Code  
Mackinac Island MI 49757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Murdock's Fudge Owner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2010

Transaction ID: C18645390

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kathleen Hoppenrath

Mailing Address 7474 Market Street, PO Box 280

City State Zip Code  
Mackinac Island MI 49757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mackinac Straits Health Systems Clinic

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 26 / 2010

Transaction ID: C18638993

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

William Janis

Mailing Address 7021 Leorie Drive

City State Zip Code  
Traverse City MI 49686

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Century Steel, Inc President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2010

Transaction ID: C18645410

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 7 / 16
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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

**A.**

Full Name (Last, First, Middle Initial)  
William Kandler

Mailing Address 1510 Sand Point Dr.

City State Zip Code  
Lansing MI 48917

FEC ID number of contributing federal political committee. **C**

Name of Employer Cusmano Kandler & Reed  
Occupation Government Relations

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2010

**Transaction ID: C18645391**

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Glenn Mroz

Mailing Address 18970 Canal Road

City State Zip Code  
Houghton MI 49931

FEC ID number of contributing federal political committee. **C**

Name of Employer Michigan Tech University  
Occupation President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2010

**Transaction ID: C18645393**

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
R.D. Musser, II

Mailing Address Grand Hotel  
Box 286

City State Zip Code  
Mackinac Island MI 49757

FEC ID number of contributing federal political committee. **C**

Name of Employer Grand Hotel  
Occupation Chairman

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2010

**Transaction ID: C18645405**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

**A.**

Full Name (Last, First, Middle Initial)  
Rodney Nelson

Mailing Address 330 Gros Cap Rd.

City State Zip Code  
Saint Ignace MI 49781

FEC ID number of contributing federal political committee. **C**

Name of Employer Mackinac Straits Health System  
Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2010

Transaction ID: C18645403

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Sherri Plutchak

Mailing Address N7311 Hendricksen Road

City State Zip Code  
Stephenson MI 49887

FEC ID number of contributing federal political committee. **C**

Name of Employer Plutchak Fabricating  
Occupation Owner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 08 / 2010

Transaction ID: C18645414

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Dale R Tahtinen

Mailing Address MI Technological University  
1400 Townsend Dr.

City State Zip Code  
Houghton MI 49931

FEC ID number of contributing federal political committee. **C**

Name of Employer Michigan Tech University  
Occupation Vice President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2010

Transaction ID: C18645407

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 16	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen H. Zimmerman		Date of Receipt																					
	Mailing Address Franklin Square, Third Floor West 1300 I Street NW		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		0	3		2	0	1	0														
	City Washington State DC Zip Code 20005		<b>Transaction ID:</b> C18645402																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00																					
Name of Employer Dykema Gossett, PLLC Occupation Attorney																								
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3500.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

**A.** Full Name (Last, First, Middle Initial)  
DTE Energy Company PAC

Mailing Address 2000 Second Avenue 1079 WCB

City State Zip Code  
Detroit MI 48226

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 8 / 2 0 1 0

**Transaction ID:** C18645415

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
DYKEMA GOSSETT FEDERAL PAC

Mailing Address 201 Townsend Street  
Suite 900

City State Zip Code  
Lansing MI 48933-1724

FEC ID number of contributing federal political committee. **C** C00342113

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 3 / 2 0 1 0

**Transaction ID:** C18645400

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** This Period (last page this line number only) ..... ► 1000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address P.O. Box 6416 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement BlackBerry - BTS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D403291 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 84.18 Category/Type: 001

<b>B.</b> Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address P.O. Box 6416 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement BlackBerry - Ann Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D404472 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 1 0
	Amount of Each Disbursement this Period 97.16 Category/Type: 001

<b>C.</b> Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address P.O. Box 6416 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement BlackBerry - BTS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D406274 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 84.18 Category/Type: 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	265.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

A.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D407300
	Mailing Address P.O. Box 6416	Date of Disbursement 06 / 08 / 2010
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period 97.16
	Purpose of Disbursement BlackBerry - Ann Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D400517
	Mailing Address P.O. Box 6416	Date of Disbursement 04 / 12 / 2010
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period 118.18
	Purpose of Disbursement BlackBerry - Ann Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D408537
	Mailing Address P.O. Box 6416	Date of Disbursement 06 / 21 / 2010
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period 84.18
	Purpose of Disbursement BlackBerry - BTS Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>299.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

A.

Full Name (Last, First, Middle Initial)  
NGP Software, Inc.

Transaction ID: D407302

Date of Disbursement

Mailing Address 1225 Eye Street, NW  
Suite 1225

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	0

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
Campaign Office Online - 3 Months

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

300.00
--------

TOTAL This Period (last page this line number only) ..... ►

865.04
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alan Mollohan for Congress</p> <p>Mailing Address Po Box 1343</p> <p>City Fairmont State WV Zip Code 26555</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Alan Mollohan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WV District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D404475</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Burton for Congress</p> <p>Mailing Address 1440 Ben Sawyer Blvd. Suite 1101 #</p> <p>City Mount Pleasant State SC Zip Code 29464</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Robert Burton</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SC District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D405062</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Driehaus for Congress</p> <p>Mailing Address 228 2nd Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Steve Driehaus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D404476</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

A.	Full Name (Last, First, Middle Initial) Earl Pomeroy For Congress	Transaction ID: D408485 Date of Disbursement
	Mailing Address PO Box 9336	<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Fargo State ND Zip Code 58106-9336	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="1500.00"/>
	Candidate Name Earl Pomeroy	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Julie Lassa for Congress	Transaction ID: D408012 Date of Disbursement
	Mailing Address PO Box 112	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Stevens Point State WI Zip Code 54481	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="2000.00"/>
	Candidate Name Julie Lassa	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Mark Critz for Congress	Transaction ID: D401563 Date of Disbursement
	Mailing Address 647 Main St., Suite 110	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Johnstown State PA Zip Code 15901	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="1000.00"/>
	Candidate Name Mark Critz	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Bart's Bridge PAC

A.

Full Name (Last, First, Middle Initial)  
McDowell for Congress

Mailing Address 10820 Glen Street

City State Zip Code  
Rudyard MI 49780

Purpose of Disbursement  
Campaign Contribution

Candidate Name  
Gary McDowell

Office Sought:  House  
 Senate  
 President

State: MI District: 01

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: D408010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ..... ►

TOTAL This Period (last page this line number only) ..... ►